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CONFIRMATION NO. 2833

<b>SERIAL NUMBER</b> 10/070,297	<b>FILING OR 371(c) DATE</b> 03/05/2002 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1634	<b>ATTORNEY DOCKET NO.</b> 50146/002002
<b>APPLICANTS</b> Bruno Tocque, Courbevoie, FRANCE; Laurent Bracco, Paris, FRANCE; Fabien Schweighoffer, Vincennes, FRANCE;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/FR00/02439 09/05/2000 and is a CON of 09/456,461 12/08/1999 PAT 6,372,432				
<b>** FOREIGN APPLICATIONS *****</b> FRANCE 99/11563 09/16/1999				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 10/06/2005</b>				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <u>B. J. Harrison</u> Allowance Examiner's Signature Initials		<b>STATE OR COUNTRY</b> FRANCE	<b>SHEETS DRAWING</b>	<b>TOTAL CLAIMS</b> 17/0
<b>INDEPENDENT CLAIMS</b> 5				
<b>ADDRESS</b> 21559				
<b>TITLE</b> Method and compositions for detecting pathological events				
<b>FILING FEE RECEIVED</b> 1058	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	